BEST AVAILABLE COPY

PATENT	APPLIC	CATION FEE	DETERMIN	ATION	RECORD
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Effective October 1, 2000

Application or Docket Number

FLZK-004

Elicotive October 1, 2000								~ /				
CLAIMS AS FILED - PA (Column 1)					mn 2)		SMALL EN	ITITY	OR	OTHER SMALL		
TOTAL CLAIMS		18					RATE	FEE		RATE	FEE	
FOR		NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS		/8 minus 20=		. 6			X\$ 9=		OR	X\$18=		
INDEPENDENT CLAIMS		5 minus 3 =		. 2			X40=	80.	OB	X80=		
MULTIPLE DEPENDENT CLAIM P			RESENT					+135=	000		+270=	
* If the difference in column 1 is less than zero enter				r "0" in c	olumn 2	' '		126 00	OR OR	TOTAL		
* If the difference in column 1 is less than zero, enter "0" in column CLAIMS AS AMENDED - PART II					HITDI	W	TOTAL	435,00	JOh	OTHER	THAN	
(Column 1)				(Colu		(Column 3)	<u>L</u>	SMALL	ENTITY	OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI PAID	IBER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	-	RATE	ADDI- TIONAL FEE
	Total		Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X40=		OR	X80=	
	FIRST PRESE	NTATION OF M	JLTIPLE DEF	PENDEN	T CLAIM		J	+135=		OR	+270=	
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colu	mn 2)	(Column 3)		ADDII. FEE			ADDIT: I EE	
AMENDMENTA		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		=		X\$ 9=		OR	X\$18=	
ME	Independent	*	Minus	***]=	41	X40=		OR	X80=	·
L	FIRST PRESE	NTATION OF MU	JLTIPLE DEF	PENDEN	TCLAIM		J.	+135=	-	OR	+270=	
	,							TOTAL		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colu	mn 2)	(Column 3)		ADDIT. FEE			AUDIT. FEE	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGI NUM PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**	<u>.</u>	=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X40=		OR	X80=	
Ľ	FIRST PRESE	NTATION OF M	ULTIPLE DEF	PENDEN	T CLAIM		J	+135=		OR	+270=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.												
***	** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											